Revised December 1974

57297

CALIFORNIA LIQUID WASTE HAULER RECORD

015-011288

TATE WATER RESOURCES CONTROL BOARD STATE DEPARTMENT OF HEALTH U13-U11400
SFUND RECORDS CTR

| PRODUCER OF WASTE (Mu | st be filled by producer) | · . | HAULER OF WASTE (Must be filled by hauler) 99 | 9000825 |
|---|--------------------------------------|--|---|----------|
| Name (PRINT OR TYPE) CODE NO. Pick up Address: (STALE) (STREET) (EITY) Telephone Number: (STALE) P.O. or Contract No.: 401496 | | | ASBURY OIL CO. 13419 Halldale Ave., Gardena, California 90249 Phone: (213) 321-1392 | |
| Telephone Number: (2/2) | n) (SYREEY) P.O. or Contract N | +v) No.: <u>401496</u> | Pick Up: Time Time upn | กั |
| | HERCW | | State Liquid Waste Hauler's Registration No. (if applicable): | - |
| į (i | Examples: metal plating, equipmen | rt cleaning, oil drilling - CODE NO. | Job No.: No. of Loads or Trips: Unit No Vehicle: vacuum truck berrels, fletbed, other (epgcspv) | - |
| DESCRIPTION OF WASTE | | , perioleum remmig, | The described waste was hauled by me to the disposal facility named below and was accepted. | |
| Check type of wastes: | | | i certify (or declare) under penalty of perjury | |
| 1. Acid solution | 6. 🗆 Tetraethyl lead sludge | 11. Contaminated soil and sand | that the foregoing is true and correct. | |
| 2. Alkaline solution | 7. Chemical toilet wastes | 12. Cannery waste | | |
| 3. Pesticides | 8. 🗌 Tank bottom sediment | 13. 🗌 Latex waste | DISPOSER OF WASTE (Must be filled by disposer) | , |
| 4. 🔲 Paint sludge | 9. 🗆 Oii | 14. Mud and water | Name (print or type): 1 CODE NO. |) |
| 5. Solvent | 10. Drilling mud | 15. 🗆 Brine | Site Address: Movience June | _ |
| Other (Specify) HILLIM OXIOES WATER CODE NO. | | | The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and | |
| Components: (Examples: Hydrochloric acid phenolics, solvents (list), meta organics (list), cyanide) | | Concentration: per Lower % ppm | Quantity measured at site (if applicable):State fee (if any): | - |
| • | | | Handling Method(s): | |
| <u>1. </u> | | H H | □ recovery | Ì |
| <u>2. </u> | | | treatment (specify): |] |
| 3. | | ∐ | treatment (specify): [EXAMPLES: INCINERATION NEUTRALIZATION, FRECIPITATION] CODE NO. | 5. |
| 4. | <u> </u> | | other (specify): |] |
| 5. | | U U | If waste is held for disposal elegwhere apacify fireal location: | <u>.</u> |
| 6. | | | Disposal Date: | |
| Hazardous Properties of Wast pH 7-9 non | | ☐ corrosive ☐ explosive | I certify (or declare) under penalty of perjury that the foregoing is true and correct. | _ |
| Bulk Volume: | gal 🔲 tons 🍇 | barrels (42 gal.) Other (SPECIFY) | The site operator shall submit a legible copy of each completed Record to the State Department Health with monthly fee reports. | of |
| Containers: (NUMBER) | drums cartons | bags other TANK (SPECIFY) | | |
| Physical State: | 🗆 solid 🦸 liquid 🗜 | sludge Other | | |
| Special Handling Instructions | (if any): | | | |
| | NONE | | | |
| The waste is described to the applicable). | best of my ability and it was delive | ered to a licensed liquid waste hauler (if | · · | |
| I certify (or declare) under penalty of perjury that the foregoing is true and correct. | | | FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300. | |
| _ | SIGNATUR | RE OF AUTHORIZED AGENT AND TITLE | D.O.T. Proper Shipping Name | _ |